

# Concussion Protocol Review for Youth Athletes and Parents

\*If there is anything on this sheet that you do not understand, please ask for explanation.

Youth Athlete Name: \_\_\_\_\_

*This form must be completed for each youth athlete, even if there are multiple youth athletes in each household.*

Parent or Legal Guardian Name(s): \_\_\_\_\_

☐ We have read the "Concussion Fact Sheet."

*If true, please check box.*

After reading the information sheet, I am aware of the following information:

	Parent/Legal Guardian Initials
A concussion is a brain injury, which should be reported to my parents, my coaches, or a licensed health care professional.	
A concussion can affect the ability to perform everyday activities, such as my classroom performance and my ability to think and balance.	
A concussion cannot be "seen." Some symptoms might be present right away. Other symptoms can show up hours or days after an injury.	
I will tell my parents, my coach, and/or a medical professional about my injuries and illnesses.	
If I think a teammate has a concussion, I should tell my coaches, parents, or health care professional about the concussion.	
I will not return to play in a game or practice if a hit to my head or body causes any concussion-related symptoms.	
I will/my child will need written permission from a licensed health care provider trained in concussion management to return to play or practice after a concussion.	
Based on the latest data, most concussions take days or weeks to get better. A concussion may not heal right away. I realize that recovery from this injury is a process and may require more than one medical evaluation.	
I realize that emergency room or urgent care physicians will not provide clearance if seen right away after the injury.	
After a concussion, the brain needs time to heal. I understand that I am/my child is much more likely to have another concussion or more serious brain injury if I/they return to play occurs before concussion symptoms go away.	
Sometimes, repeat concussions can cause serious and long-lasting problems or death.	
I have read the concussion symptoms on the Concussion Fact Sheet	

\_\_\_\_\_  
Signature of Coach or Volunteer

\_\_\_\_\_  
Date